

**Work Order ID 69080**

Thursday, April 28, 2011 2:23:18 PM



Page 1

Item ID: D2493

Accept



Setup Start



Revision ID:

Stop



Item Name: Patient Stop Assembly

Start Date: 4/28/2011 Start Qty: 1.00



Cust Item ID:

Required Date: 4/29/2011 Req'd Qty: 1.00



Customer:

Reference:

Approvals:

Process Plan:

*mf*

Date: 11-04-28 Tooling:

Date:

Run Start



QC:

Date:

SPC (Y/N):

Date:

Stop

Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

Draw Nbr

Revision Nbr

D2493

Rev B

100

0.00



Small Fab

Small Fab

Memo

0.00

Small Fab

Assemble as per Dwg D2493.

*5/11/09* ①

110

0.00



QC5- Inspect part completeness to step on W/O

QC

Memo

0.00

Quality Control

*5/11/09*

⑦

120

0.00



Identify as per dwg &amp; Stock Location: \_\_\_\_\_

Packaging

Memo

0.00

Packaging

*11/5/09* ⑫

W/O:		WORK ORDER CHANGES						
DATE	STEP	PROCEDURE CHANGE		By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

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Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start



QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop

Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

130

QC21- Final Inspection - Work Order Release

0.00



QC

Memo

0.00

Quality Control

11/5/11

U 6605-10

W/O:		WORK ORDER CHANGES						
DATE	STEP	PROCEDURE CHANGE		By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

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\_\_\_\_\_

**Required Qty: 1.00**

**Comments:** IPP C03.01.17Reformat; Incorporated D2492KJ/RFIPP Rev:D  
10.09.24 as per revB DD verf:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D2492 		Manufactured	No			100	Each	0.0000	1	1			
Patient Stop D2444 		Manufactured	No			100	Each	2.0000	2	2			
Pip Pin Assembly													
				<u>Location</u>				<u>Loc Qty</u>		<u>Loc Code</u>			
				ST014				2					
					65326			2					
MS27039-1-07 		Purchased	No			100	Each	156.0000	2	2			
Screw													
				<u>Location</u>				<u>Loc Qty</u>		<u>Loc Code</u>			
				ST291				156					
					18106			156					
NAS1149D0363J 		Purchased	No			100	Each	2,427.000	2	2			
Washer													
				<u>Location</u>				<u>Loc Qty</u>		<u>Loc Code</u>			
				ST298				2427					
					116583			927					
					117291			1000					
					117505			500					

W/O:		WORK ORDER CHANGES						
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Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)							
DATE	STEP	Description of NC Section A	Corrective Action		Section B		Verification Section C	Approval Chief Eng	Approval QC Inspector
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**NOTE:** Date & initial all entries

# Picklist Print

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Work Order ID: 69080



Parent Item: D2493

Parent Item Name: Patient Stop Assembly

Start Date: 4/28/2011

Required Date: 4/29/2011

Start Qty: 1.00

Required Qty: 1.00

MS21042L3

Purchased

No

100

Each

2,197.000

2



Nut

*Handwritten signature and date: 4/28/09*

Location

Loc Qty

Loc Code

ST300

2197

116391

11

116540

614

116549

772

117441

800

*Handwritten number 2*

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Shop Packet Print

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W/O:		WORK ORDER CHANGES						
DATE	STEP	PROCEDURE CHANGE		By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

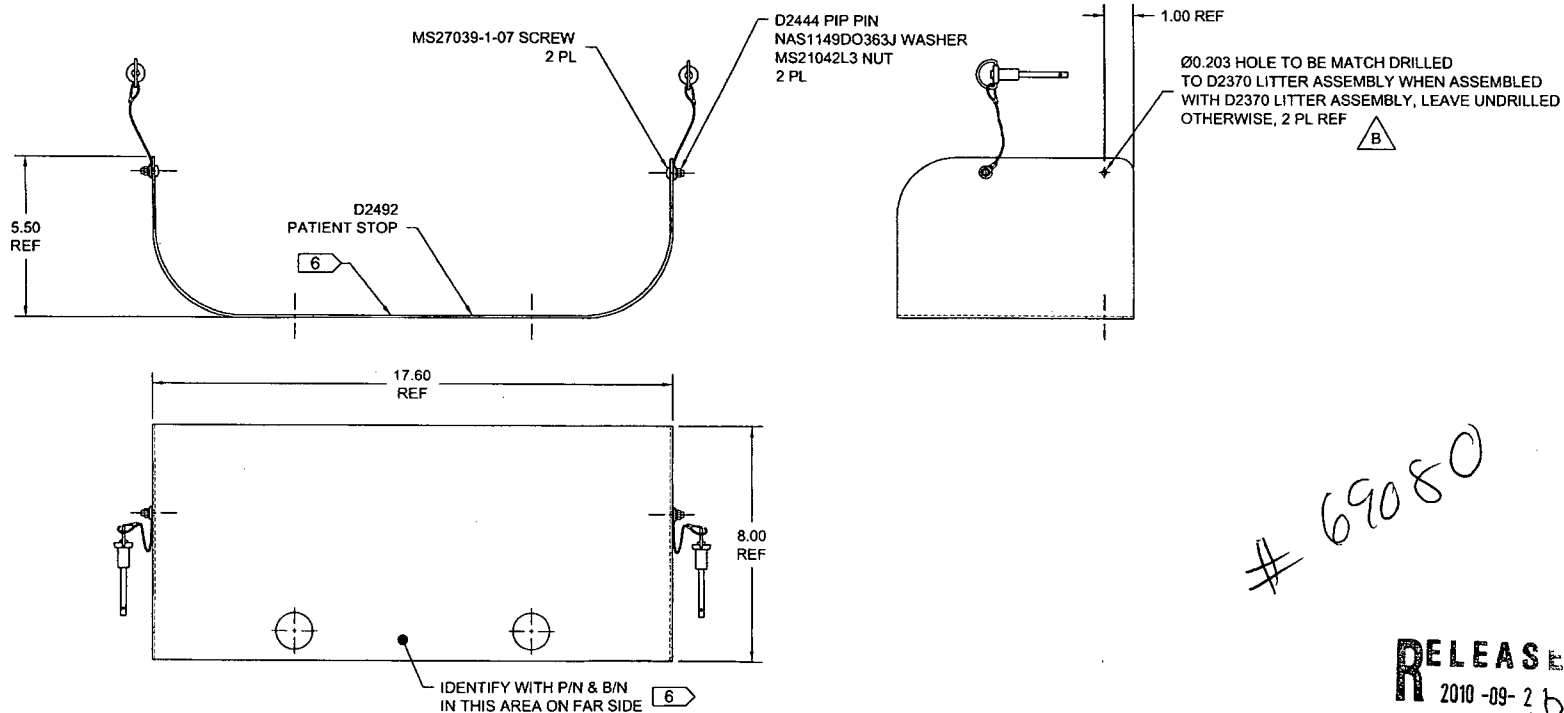
Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

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ITEM	QTY	PART NUMBER	DESCRIPTION
1	X	D2493	PATIENT STOP ASSEMBLY
2	1	D2492	PATIENT STOP
3	2	D2444	PIP PIN
4	2	MS27039-1-07	SCREW
5	2	NAS1149DO363J	WASHER (OR AN960JD10)
6	2	MS21042L3	NUT (OR MS21042-3)



**D2493 PATIENT STOP ASSEMBLY**

**NOTES:**

- 1) MATERIAL: SEE PARTS LIST
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: P/N "D2493" AND B/N PER DART QSI 044 6.1 (FINE POINT PERMANENT INK MARKER)
- 7) WEIGHT: 1.7 lbs

**RELEASE**  
2010-09-21

B	REDRAW, HOLE NOW DRILLED (D2-1, NCR10-062)	CP	10.08.10
A	NEW ISSUE	BW	95.10.24
REV.	DESCRIPTION	BY	DATE
DESIGN	BW	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWN	BP		
CHECKED	BP	DRAWING NO.	REV. B
MFG. APPR.	BP	D2493	SHEET 1 OF 1
APPROVED	BP	TITLE	SCALE
DE APPR.	BP	PATIENT STOP ASSEMBLY	NTS
DATE	10.08.10	COPYRIGHT © 1995 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD	

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